In re Ap	oplication of:	)
ROGEL	J et al.	)
Serial N	umber: To be assigned TADEMARK OFFICE	)Art Unit:To be assigned
Filed:	Concurrently herewith	)Examiner: To be assigned
For:	INHIBITION OF CELL SURFACE PROTEIN DISULFIDE ISOMERASE	RECEIVED

**Assistant Commissioner for Patents** Washington, D.C. 20231

Logal Staff International Division

2 8 JAN 2000

## NATIONAL STAGE FILING OF A PCT APPLICATION IN **COMPLIANCE WITH PCT ARTICLE 33(1)-(4)-IPEA-US**

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•		*	
. 7	ı		

The below-identified communication(s) is (are) submitted in the captioned application or proceeding:

Application (33 pgs spec, 19 claims)

■ Associate Power of Attorney

□ Declaration

Information Dis. Statement

▼ Fee Transmittal Form

X Form PTO 1449

Formal Drawings (6 sheets)

■ Notice of Priority

▼ Preliminary Amendment

**☒** Check for \$48.00

X

The Commissioner is hereby authorized to charge payment of any fees associated with this communication, including fees under 37 C.F.R. §§ 1.16 and 1.17 or credit any overpayment to Deposit Account Number 10-0233-UNME-0054-1.

Respectfully submitted.

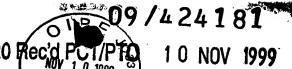
Registration Number 35,205

November 9, 1999

JAGTIANI & ASSOCIATES

**Democracy Square Business Center** 10379-B Democracy Lane Fairfax, Virginia 22030

(703) 591-2664



1 0 NOV 1999

## FEE TRANSMITTAL FORM

CLAIMS	FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
	TOTAL CLAIMS	19-20=	0	x\$18 =	\$0.00
	INDEPENDENT CLAIMS	2-3=	0	x\$78 =	\$0.00
	MULTIPLE DEPENDENT CLAIM(S) (if applicable) +\$260 =				\$0.00
Ŷ			BASIC FEE 1.492(A)(4)		\$96.00
			TOTAL OF ABO	OVE	\$96.00
REDUCTION BY 50% FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				-\$48.00	
	3,00			TOTAL=	\$48.00

1. X A verified statement to establish small entity status under 37 CFR 1.9 and 1.27		•
☑ is enclosed		
was filed in prior application number <a href="xx/xxx,xxx">xx/xxx,xxx</a> and such status is still proper and desired (37 CFR 1.28(a)).		
2. The Commissioner is hereby authorized to charge any additional fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 10-0233-UNME-54.		YALUE INTABILITY
	DEPOSIT	ACCOUNT NO
3. A check in the amount of \$48.00 for the filing fee is enclosed.	10	1122
☐ A check in the amount of \$ for the assignment is enclosed.	10	
<ul> <li>4. ☐ Cancel in this application original claims of the prior application before calculating the filing fee.</li> <li>(At least one original independent claim must be retained for filing purposes.)</li> </ul>	FEE CODE	VALUE FURNISHED
Address all future communications: (May only be completed by applicant or attorney/agent of record.)	154	.65.
JAGTIANI & ASSOCIATES		
Democracy Square Business Center 10379-B Democracy Lane	<b> </b>	
Fairfax, Virginia 22030	1 1	
/		
November 9, 1999	<u></u>	
11/4/14		

Attorney or Agent of Record Inventor(s) Assignee of Complete Interest Filed under § 1.34(a)